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## HOW TO OBTAIN A DEMOLITION PERMIT in Murray City

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Apply at the Building Inspection Division in the Public Services Department located at 4646 South 500 West, Murray UT 84123. A packet of information, forms and examples are available.

1. Applicant needs to fill out **highlighted portions** of the permit application. **Note:** an appropriate **Utah Licensed Contractor** is required.
2. Applicant needs a completed form from the **Utah Division of Air Quality (UDAQ)** if the property is a **commercial building**. If the property is **residential (4 units or less)** the applicant will need to have UDAQ "waive" their requirement in writing (contact person = **Joan, 801-536-4084** or **Lisa, 801-536-4007**). Building Department will receive an e-mail from UDAQ with an "ACCEPTED" stamp on the **bottom of form**.
3. Applicant needs a completed form from **Salt Lake County Health Department** (contact person = **John Hoggan, 385-468-3914** or **Tiffany, front desk, 385-468-3862**). Applicant will bring a form with approved signatures (form must be stamped with a "check mark" by John Hoggan) to Building Department.
4. Applicant needs **confirmation from Questar that gasline has been shut off** (contact person = "Ask-A-Tech", you will get a "live" person at **801-324-3287**). **Applicant must be sure to have the correct address** when they call Questar. Building Department **must receive an e-mail from Questar saying gasline has been "killed" OR there is "no" gasline at this address.**
5. Applicant needs to contact **Mary Ann Kirk at 801-264-2638** to discuss any historical significance of the building. **Historic Preservation Board review** will be determined by **Mary Ann Kirk**. **Mary Ann will e-mail the Building Department approving the demolition.**
6. Applicant needs to contact **Community & Economic Development at 801-270-2420** to verify if demolition address is or is not in the **Murray City Center District (MCCD)**. **Community & Economic Development will e-mail the Building Department approving the demolition.**
7. Applicant must meet with the **Operations Division (Water & Sewer Department at 801-270-2440)** to determine if **disconnect fees** will be applied. If it is determined that fees do apply, **the minimum cost will be \$275.00**, with a possibility of additional costs depending on time and materials used when the job is completed. **A form indicating a fee or no fee must be returned to Building Department by the applicant.**
8. Applicant must speak with **Mike Pfeiffer at 801-270-2454** or **Trae Stokes at 801-270-2401(Engineering Dept)** to discuss if a **Land Disturbance Permit** is required. Mike or Trae will e-mail Building Department approving the demolition.
9. After all the above approvals and clearances have been granted, a demolition permit will be issued. The Murray City Building Department demolition permit fee is **\$50.50**.
10. After permit is issued, applicant needs to coordinate with **Utility Billing at 801-264-2626** for utility disconnection.

# MURRAY CITY

## BUILDING INSPECTION DIVISION PERMIT APPLICATION APPLY AT 4646 SOUTH 500 WEST, MURRAY UT 84123

Date of Application		Estimate of Cost	Application # -Assigned by City <b>16-</b>	
General Description of Project	Total Property Area Acres =	Square Footage of Structure	Project Completion Deposit \$	
Project Address		Zone		
		Type of Improvement (Check One)		
Subdivision	Lot #	<input type="checkbox"/> New Residential <input type="checkbox"/> New Commercial <input type="checkbox"/> Addition	<input type="checkbox"/> Remodel <input type="checkbox"/> Sign <input type="checkbox"/> Change of Use	<input type="checkbox"/> Repair <input type="checkbox"/> Demolish <input type="checkbox"/> Other
Owner Owners Address City, State, ZIP Phone #		<b>CONTACT PERSON:</b>  Name:  Phone:		
Tenant	Phone			
Architect	Phone			
Engineer	Phone			
General Contractor	Phone	<b>BUILDING TYPE &amp; APPROXIMATE AGE:</b>		
Address	State License #			
Electrical Contractor	Phone	Owner Builder Affidavit Required      Yes <input type="checkbox"/> No <input type="checkbox"/>		
Address	State License #			
Mechanical Contractor	Phone	This application becomes void if permits are not issued within 180 days of approval. The permits expire 180 days after work authorized by permit is suspended or abandoned. I hereby certify I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any state or local law regulating construction or the performance of construction. I make this statement under penalty of perjury.		
Address	State License #			
Plumbing Contractor	Phone	Owner, Contractor, or Authorized Agent _____ Date _____		
Address	State License #	Print Name _____		

## **EXTERIOR DEMOLITION**

1. Contractor Name: \_\_\_\_\_

2. Contractor Phone Number: \_\_\_\_\_

3. Address of Demolition: \_\_\_\_\_

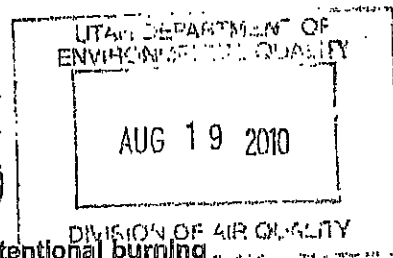
4.	E-Mail to Jeff Ellis (Fire):	<u>Jellis@murray.utah.gov</u>
	E-Mail to Erik Lindquist (Police):	<u>Elindquist@murray.utah.gov</u>
	E-Mail to Trent Pearson (Police)	<u>Tpearson@murray.utah.gov</u>
	E-Mail to Matt Boulden (Fire):	<u>Mboulden@murray.utah.gov</u>



UTAH DIVISION OF AIR QUALITY  
195 North 1950 West, 4th Floor  
P.O. Box 144820  
Salt Lake City, UT 84114-4820

Postmark Date:  
Initials:  
Fee Received:  
Check Number:

410  
JMB  
1000  
25557



# 10 WORKING-DAY NOTIFICATION OF DEMOLITION - no asbestos removed, no intentional burning

1 Fee \$50 +\$25 for each 5,000 sq. ft. of floor space above 5,000 sq. ft.

See fee calculator at [www.deq.utah.gov/eqair/haps/asbestos/index.htm](http://www.deq.utah.gov/eqair/haps/asbestos/index.htm)

## 2 Facility Name

Address Nordstrom's  
City Murray County SL Zip Code 84107  
Part of Facility Involved, (e.g. floor #, room #, area etc.) Entire building  
Age of Facility 30+ Size 112,000 sq. ft. # of Floors 2  
Present use VACANT Prior Use RETAIL

## 3 Facility Owner/Operator Name

Address 110 N. Wacker Dr. City Chicago State IL Zip Code 60606  
Contact Person Eris Longsten Phone Number (801) 467-6048

## 4 Demolition Contractor Name

Address 6891 S. 700 W. City Midvale State UT Zip Code 84042  
Contact Person Larry Henkel Phone 801-915-8300

## 5 Dates of Demolition

Start Date 9/2/10 Ending Date 11/2/10

## 6 Asbestos Inspection Information

Name of Utah Certified Inspector Charles Dixon Date of Inspection 3/21/06  
Name of Utah Certified Asbestos Company ENVIRONMENTAL SOLUTIONS ID Number 2466  
Analytical Method used for asbestos analysis PLM ID Number 298  
Is asbestos present? YES Was it sampled or assumed? SAMPLING

## 7 Asbestos Containing Material to be left in the facility during demolition, (list types and amounts).

roofing 100 SF flooring 2500 SF other

## 8 Description of procedures to be followed in the event that unexpected RACM is found or generated during the project.

attach additional sheets as necessary

## 9 I certify that the all the information in this notification is true and correct.

Signature of Owner/Operator Larry Henkel Date 8/19/10  
Print name and title of Owner/Operator Larry Henkel

## OFFICIAL USE ONLY

Date Accepted 8/19/10 Date Rejected   
Acts #: 22481 Reviewers Initials MWB  
Rejection Comments:

ACCEPTED



Division of Environmental Health  
Bureau of Water Quality and Hazardous Waste  
788 E Woodoak Lane, #120  
Murray, Utah 84107-6379  
Ph: (385) 468-3862 / Fax: (385) 468-3863

**Pre-demolition Building Inspection Form**

Select one: Residential  
Business

~~Example~~

**GENERAL INFORMATION**

Address of Demolition, Including City:		Inspection Date:
Property Owner Name and Contact Information:		Demolition Permit Holder or Contractor Name and Contact Information:

**INSPECTION RESULTS**

	Amount	Condition (Select one)	
Mercury (Hg) Thermostats		Damaged	Undamaged
Hg Fluorescent Lights		Damaged	Undamaged
PCB Ballasts or Transformers		Damaged	Undamaged
Refrigeration Units Containing CFC's		Damaged	Undamaged
Containers of Hazardous or Special Waste, Including Vehicle Batteries:		Damaged	Undamaged
Suspect ACM (Substrates sampled):	Ceiling tile	Ceiling texture	Drywall
Flooring	Heat tape	Insulation	Roofing
Window caulk	Other	other	None present
Inspector's Name: (Sign) (Print)			Reg. # PBI -

**FOLLOW-UP INSPECTION RESULTS**

Date:	Inspector (Sign):
Have all items identified above been removed? (Select one) Yes No	

**DISPOSITION OF IDENTIFIED ITEMS OR COPIES OF RECEIPTS**

	Name of Disposal or Recycling Facility	Date
Hg Thermostats		
Hg Fluorescent Lights		
PCB Ballasts or Transformers		
Refrigeration Units Containing CFC's		
Hazardous or Special Waste; Batteries		
ACM		

DO NOT WRITE IN THIS SECTION - FOR HEALTH DEPARTMENT USE ONLY

Approved by:

Approved on:

JH 10 NOV 2014

# WATER & SEWER DISCONNECT FEES

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

LOCATION OF WORK: \_\_\_\_\_

## DESCRIPTION OF WORK TO BE DONE:

## CERTIFICATION STATEMENT

Certify each that apply:

\_\_\_\_\_ I understand that by changing the use of the property from residential to commercial, the water service must be brought up to Murray City's minimum specification for water i.e. 1" (inch) copper from the street to the water meter, 1" (inch) yoke and new box if necessary.

\_\_\_\_\_ Yes, I want the water and sewer services terminated permanently.

\_\_\_\_\_ No, I do not want the water and sewer services terminated, I intend on using them in the future.

Signature of Person making Certification: \_\_\_\_\_

DEMO PERMIT AMOUNT: \$ 50.50

WATER & SEWER DISCONNECT FEE AMOUNT: \$ \_\_\_\_\_  
(Minimum \$275.00)

TOTAL FEES FOR DEMO: \$ \_\_\_\_\_

SIGNED: \_\_\_\_\_

Danny Astill  
(Street, Water & Sewer)